POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*hw*	68904	1/18/01
O.I.P.E. CLASSIFIER	M-XI		
FORMALITY REVIEW	25	45-455	2/1/2
RESPONSE FORMALITY REVIEW	AV	5005	4/19/10

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		Date									
Final	Original	12/10/05	5/20/06								
1		✔	—								
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19			✔								
20			✔								
21											
22			✔								
23											
24											
25											
26											
27											
28											
29											
30											
31											
32											
33											
34											
35											
36											
37											
38											
39											
40											
41											
42											
43											
44											
45											
46											
47											
48											
49		✔	✔								
50		✔	✔								

Claim		Date									
Final	Original	12/10/05	5/20/06								
51		✔	✔								
52		✔	✔								
53											
54											
55											
56											
57											
58											
59											
60											
61											
62											
63											
64											
65											
66											
67											
68											
69											
70											
71											
72											
73											
74											
75											
76											
77											
78											
79											
80											
81											
82											
83											
84											
85											
86											
87											
88											
89											
90											
91											
92											
93											
94											
95											
96											
97											
98											
99											
100											

Claim		Date									
Final	Original										
101											
102											
103											
104											
105											
106											
107											
108											
109											
110											
111											
112											
113											
114											
115											
116											
117											
118											
119											
120											
121											
122											
123											
124											
125											
126											
127											
128											
129											
130											
131											
132											
133											
134											
135											
136											
137											
138											
139											
140											
141											
142											
143											
144											
145											
146											
147											
148											
149											
150											

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)